CACFP Sponsored Center (Site) Review Form

Iowa Child and Adult Care Food Program

Recommended Form Revised 8/2006 Revised to meet 2nd Interim Rule Sponsored Center Site Review Form

Requirement: Sponsors must adequately train, supervise & review sponsored center (site) operations to ensure that CACFP requirements are met. Written site reviews must be done and documented before CACFP participation & 3 times per fiscal year for sites with 12 claims. If the site has 5-11 claims do 2 reviews, if 1-4 claims do 1 review. Review averaging option: Sites with 12 claims may receive 2, 3, or 4 reviews if the total number of reviews for all sites = 3 x the number of sites & the State is notified that review averaging will be used. Review averaging cannot be used for sites with block claims or serious deficiencies. No more than 6 months may elapse between reviews, & no more than 9 months may elapse when 2 reviews are conducted, from one fiscal year to the next. If doing 2 reviews, both must be unannounced, one of which must be at mealtime. Centers may receive announced or unannounced visits at any time from any CACFP governmental official. Proper ID must be available from any review official.

Instructions: Complete this form for sponsored center site reviews. Another form may be used if each required review element is included. Fiscal year reviews: Pre-approval___ 1st ___ 2nd 1. REVIEW INFORMATION **Sponsor name:** Site number Site name: Review averaging: Y_ **THIS REVIEW:** Arrival time: Departure time: LAST REVIEW Date: Reviewer: Announced Date: Reviewer: Unannounced- meal observed_ Unannounced-no meal observed_ 2nd Unannounced 1st Unannounced___ Is this review due to a block claim? Y___ N___ If yes, document findings. Announced Meal Observed: B AM L PM S ES Enrollments are updated yearly: Y Number enrolled: None License/approval expiration date: ___ Over capacity: Y__ N__ Capacity: __ List any required changes from the last review. Total attendance at this review: ADA for claim: ___ Is today's total attendance reasonable by comparison**? Y__N__ Do parents generally sign children in/out**? Y__ N__ Is a household contact needed? Y___ (if block claim+ 2 other factors**) N_ Serious Deficiency: Y___ N___ (if yes, current visit must be unannounced.) Yes No N/A **Comments** 2. MEAL SERVICE Record foods served and serving sizes Check Meal Type: B__ AM__ L__ PM__ S__ ES N/A Meal Name of food served Amt(s) Requiremnts Was the meal served within ½ hour met? Component served of State approved time? Did staff sit with participants, Milk Enough food served? enjoy and discuss foods? Meat/Alternates Was meal adequately supervised? Yes No Grain/Bread Was the meal served family style? (2 for Adult If yes: Centers) Were participants appropriately Fruit/Veg. Met meal pattern? encouraged to try all foods? (2 for L and S) Yes No Were bowls and utensils sized for easy Other passing and serving? Was all food on table at beginning of **Number Served** Total participants served: Age Group Rm 1 Rm 2 Rm 3 meal? Comments: If staff served food, were the 1-2 years required amounts on the plate (cup) at the beginning of the meal? Was mealtime atmosphere 3-5 years pleasant, relaxed and calm? 6-12 years Did participants decide how much and which foods to eat? Adult participant Was an accurate meal count taken during meal time**? Staff Yes No N/A 3. INFANTS Comments Record foods served to infants and serving sizes Check Meal Type: B__ AM_ L □check if infants are not claimed PM S ES N/A Does the center offer to provide formula Meal Component Birth through 4 through 7 8 through 11 and is this documented with parent-signed 3 months months months infant enrollment forms on file? Iron fortified Are bottles & food from home infant formula or labeled with date & child name? breast milk Optional Are meals recorded during meal service? Iron-fortified infant cereal Optional Fruit/Vegetable Are there daily dated menus for each child or age group? Optional Meat/Meat Is there written communication alternate from parents about foods to serve? Do meals contain required Bread/Crackers (snack only) components and serving sizes? Juice (snack only) Optional Is food chosen and textured to avoid choking? When ready for Do claimed meals contain at least Number of solids infants served one center-provided component?

4. SAFETY/SANTATION	Yes	No	N/A	Comments		6. RECORD KEEPING		No	N/A	Comments
Do participants and staff wash						5-day reconciliation: Do meal counts correspond to enrollments &				If no, is a facto
ands before and after meals and fter using the restroom?										for parent contact
Are can openers washed daily or		<u> </u>	+			attendance for the last five days**? Are meal count records up to date?				Contact
when used?					mour count rect					
Are tables washed and sanitized					Are daily dated men	nus on file for all				
before meals?					meals served?					
Is the refrigerator(s) clean and at					Are menus posted i					
a temperature 32°-40°F?	<u> </u>				in each room where					
Is the freezer clean and at a										
temperature of 0° F or below? Are disposable gloves or clean	<u> </u>	 				menus and food production records? Menus offer a healthy variety of				
utensils or hands used to directly					colors, flavors, text					
handle food?					temperatures, famil					
Using a 3-compartment sink, is					Do weekly menus is	Do weekly menus include at least				
the proper manual dishwashing					3-4 servings of Vita					
sequence followed?	ļ				2-3 serving of Vitar					
Is the dishwasher temperature					Do menus include fresh fruits and					
maintained at or above 155°F?	 	├──	 			vegetables at least twice weekly? Are sweets limited to twice weekly?			1	
Are transported foods kept at safe temperatures (below 40°F									1	
for cold foods and above 140°F					Do production reco					
for hot foods)?					that minimum requi	red amounts of				
Is an appropriate sanitizer used	 	 	 		food were prepared	on records				-
on food contact surfaces?						Were food production records completed for the observed meal?				
Is sanitizer/bleach used mixed &		 	 		Is attendance recorded separately				-	
used according to directions?					from meal counts?					
Do food handlers wash hands			1			Are medical statements on file for				
before handling food and after					participants who are	unable to follow				
touching anything unsanitary?					the CACFP meal pa	the CACFP meal pattern?				
Is food served at appropriate					7. TRAINING			No	N/A	Comment
temperatures?	 '				77 00 1: 1					G
Is food properly stored in						Key staff * have <u>at least</u> 1.5 hours of				Staff may nee
refrigeration units and in dry storage areas (labeled, sealed,						CACFP training prior to Program				more than 1.: hrs to perform
insect proof)?						operations &/or within the last year & enough to do duties correctly?				CACFP dutie
Are regular cleaning schedules			 			If not, list CACFP training topics		Topics		Dates
maintained?					needed and when th		Topics Dates		Dates	
					provided.					
Is a licensed pest control service					8. TEAM NUT	RITION	Yes	No	N/A	Comment
used regularly?										
Are food storage areas free of					Do participants hav					
pests, cleaning supplies and medicines?					opportunities to lear					
Are there any obvious fire,						healthy eating and physical activity? Do children have opportunities for				
health or safety hazards						open and adult led physical activity				
observed in the center?	l '					daily both indoors and outdoors? (About 60 min. total for children)				
	l '									
5. CIVIL RIGHTS	Yes	No	N/A	Comments		Participants have weekly planned				
_	105	1,0	1 1/12	00111110110		food or nutrition activities?				
Is an "And Justice for All" civil					Do families receive					
rights poster on display in a						center nutrition and physical activity				
public area?	 	<u> </u>	<u> </u>			policies when enrolling? Do participants with special needs			1	
All meals are served equally to					Do participants with have their nutrition					
all participants regardless of race, color, sex, age, disability &					activity needs provi					
national origin?	l '				they are in care?	ded for willie				
*Key people that must receive	o voarly	CACE	P traini	ing are private "fo		ers staff with CA	CFP ro	 enoncihi	lities inc	luding but no
limited to administrative and										
							cs, and v	orunteer	15 01 100	ir d illellibers
nrimary CACFP mealtime ar	iu/oi uc		_	-	tanning to the claim.					
- •	n cono		age II II	eeueu)						
9. FINDINGS (continue of		nate p								
primary CACFP mealtime ar 9. FINDINGS (continue of Good management practices ob		rate p		,						
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